

OCT 31 2007

Atty. Dkt. No. 99PS014/KE (047141-0327)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Berry, Marilee G.
Title: CHANNEL
IDENTIFICATION FOR
DIGITAL BROADCASTS IN
PASSENGER
ENTERTAINMENT
SYSTEMS

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below. Amanda Rutter (Printed Name) (Signature) October 31, 2007 (Date of Deposit)
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Appl. No.: 09/578,567
Appl. Filing Date: 5/25/2000
Examiner: Hoyle, Michael W.
Art Unit: 2614
Confirmation Number: 6188

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

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1. Submission required under 37 C.F.R. §1.114: (check items that apply)

a. Previously submitted:

- ☐ Please enter and consider the amendment and/or reply previously filed on ____.
- ☐ Please consider the Affidavit(s)/Declaration(s) previously filed on ____ but not considered.
- ☐ Please consider the arguments in the Appeal Brief or Reply previously filed on ____.
- ☐ Other ____.

b. Enclosed are:

- ☒ Amendment/Reply (10 pages).
- ☐ Affidavit(s)/Declaration(s).
- ☐ Information Disclosure Statement.
- ☐ Form PTO/SB/08 with copies of ____ listed reference(s).
- ☐ Other .

Miscellaneous:

- ☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months.

OCT 31 2007

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The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$810.00	= \$810.00
Total Claims:	12	- 20	= 0	x \$50.00	= \$0.00
Independents	3	- 3	= 0	x \$210.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$370.00	= \$0.00
CLAIMS FEE TOTAL:					= \$810.00

☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/>	Extension for response filed within the first month:	\$120.00	0	\$0.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$460.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$1,050.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,640.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$2,230.00		\$0.00
	EXTENSION FEE SUBTOTAL:			\$0.00
	EXTENSION FEE ALREADY PAID:	-		\$0.00
	EXTENSION FEE TOTAL			\$0.00
	CLAIMS AND EXTENSION FEE TOTAL:			\$810.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract 1/2 of above):			\$0.00
<input type="checkbox"/>	Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
	TOTAL FEE:			\$810.00

A credit card payment form in the amount of \$810.00 to cover the filing fee is enclosed.

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The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 10-31-2007By K.F. Reichenberger

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